

# KIDSNET Update



August 2010  
Volume 6, Issue 8

KIDSNET facilitates the collection and appropriate sharing of health data with healthcare providers, parents, MCH programs and other child service providers for the provision of timely and appropriate preventive health and follow up.

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## **KIDSNET Welcomes: Meeting Street Early Head Start**

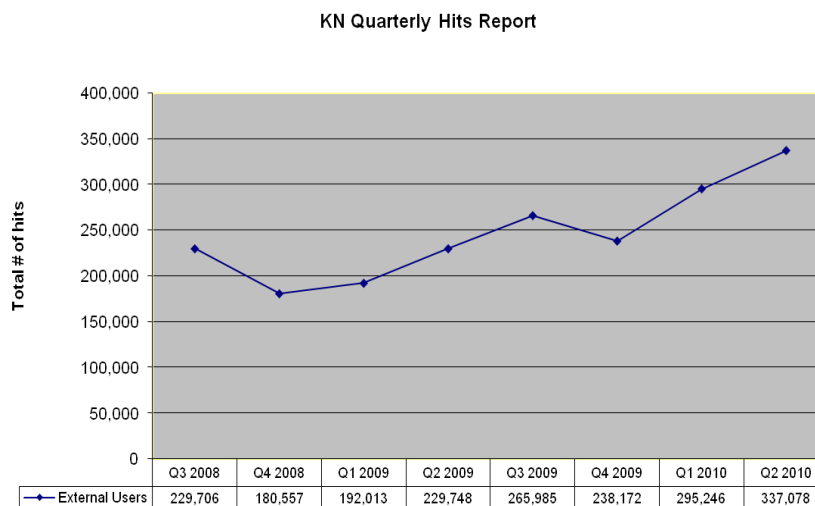
### **Multi-dose Vial Expiration Dates:**

The Centers for Disease Control and Prevention (CDC)'s Immunization Program states that vaccine are to be discarded per the manufacturers expiration date. The Joint Commission is applying this to all vaccines (whether the vaccines are a part of CDC or state immunization programs or are purchased by healthcare facilities) with the understanding that the vaccines are stored and handled appropriately (correct temperature is maintained, frequency of temperature checks, etc). Following the guidelines provided in the manufacturers' package inserts is very important to ensure the integrity of vaccines.

On July 20, 2010, the Joint Commission published a frequently asked questions document on its website that further clarifies its requirements for the use of multi-dose vials and their expiration dates. The complete Multi-dose Vial FAQs are available at:  
[http://www.jointcommission.org/AccreditationPrograms/LongTermCare/Standards/09\\_FAQs/MM/Multi-dose\\_Vials.htm](http://www.jointcommission.org/AccreditationPrograms/LongTermCare/Standards/09_FAQs/MM/Multi-dose_Vials.htm)

### **KIDSNET Use Continues to Rise:**

The overall use of KIDSNET is increasing steadily as more data is collected in KIDSNET and the number of community partners using KIDSNET to coordinate care for Rhode Island children grows. When looking at the number of times that users viewed a webpage in KIDSNET (hits), use increased 47% from the second quarter of 2009 to an all time high of 337,078 hits in the second quarter of 2010. This rise can be attributed to increased use among primary care providers, school nurses, managed care organizations, and audiologists. They are looking to KIDSNET as a source of information about preventive health services received by children in their care and about the levels of participation of these children in public health programs.



\*HITS are number of times users have viewed a single page on KIDSNET

For more information about KIDSNET, please visit our website: [www.health.ri.gov/family/kidsnet](http://www.health.ri.gov/family/kidsnet).  
Call the HEALTH Information Line at 401-222-5960 with any questions or suggestions.

## **KIDSNET Reports**

### **Immunization Report**

In July 2010, the following **35** pediatric practices ran the missing immunization report:

Allen Berry Health Center - PCHC,  
Bristol County Pediatrics, Capitol Hill  
Health Center - PCHC, Chad  
Nevola, MD, Chafee Health Center -  
PCHC, Charles J. DeAngelis, MD,  
FAAP, LTD, Douglas Foreman, DO,  
East Bay Community Action  
Program, East Bay Family Health  
Care, East Greenwich Family  
Practice, East Greenwich Pediatrics,  
East Side Pediatrics, Family  
Treatment Center, Hillside Avenue  
Family and Community Medicine,  
Jennifer Salm, MD - Aquidneck, Kate  
O'Heelan, Leena Davis, MD, Lincoln  
Pediatric Associates, Michael  
Hayden, DO, Mineral Spring Family  
Practice, Narragansett Indian Health  
Center, North Providence Pediatrics,  
Northstar Pedi Primary Care,  
Pediatric Associates, Inc., Richard  
Ohnmacht, MD, LTD, Smithfield  
Pediatrics, Stuart V. Demirs, MD,  
Sunshine Pediatrics, Thomas David  
Puleo, MD, Wakefield Pediatrics,  
Warren Family Practice Associates,  
Wellone - North Kingstown, Wellone  
- Pascoag, Westerly Pediatrics and  
Wood River Health Services

### **Lead Screening Report**

In July 2010, the following **13** pediatric practices ran the report for children never screened for lead poisoning:

Charles J. Deangelis, MD, FAAP,  
LTD, Douglas Foreman, DO, East  
Bay Community Action Program,  
Family Treatment Center, Kate  
O'Heelan, Lampal & Montgomery,  
MDs, Lincoln Pediatric Associates,  
Mineral Spring Family Practice,  
Northstar Pedi Primary Care, Warren  
Family Practice Associates, Wellone  
- North Kingstown, Wellone -  
Pascoag, and Westerly Pediatrics

## ***HPV Recommendation:***

CDC recommendations state that the minimum intervals for human papillomavirus (HPV) vaccination are at least four weeks between the first and second doses and at least 12 weeks between the second and third doses. This represents a total of 16 weeks between the first and third doses. The CDC recommendations also state that there must be a minimum of 24 weeks between the first and third doses.

When administering HPV vaccine, you must meet ALL the minimum intervals. For example, if you give a second dose at the minimum interval of four weeks after the first dose, you must wait 20 weeks to administer the third dose. Doing so allows for the minimum 24-week interval between the first and third doses. These minimum interval recommendations resulted from extensive discussions with vaccine manufacturers and from data from HPV clinical trials.

### ***Enrollment in the State-Supplied Vaccine (SSV) program:***

All practices wishing to receive state-supplied vaccine should have completed enrollment in the SSV program for the fiscal year 2011. Fiscal year 2011 ends on June 30, 2011. A single enrollment process is available for vaccines for individuals of all ages, including influenza vaccine. Vaccine orders will not be processed for those practices that have not enrolled for this period. The enrollment webpage may be accessed by logging onto KIDSNET or by using this link:

<https://kidsnet.health.ri.gov/vaccine>

### ***Influenza Vaccine Program:***

Enclosed with this month's KIDSNET Update are responses to frequently asked questions about this year's influenza vaccine ordering, distribution, and administration. We hope that you find this information helpful.

Additionally, enclosed is a decision tree to help you determine the appropriate number of doses of 2010-2011 seasonal influenza vaccine that children will need.

### ***State Supplied Vaccine (SSV) Product Availability Guidance:***

Many practices are now ordering and utilizing vaccine for pediatric patients and for individuals 19 years of age and older. The enclosed guide describes which vaccines may be ordered and used for people in different age groups.



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## Frequently Asked Questions: Healthcare Providers and 2010-2011 Seasonal Flu Vaccine

August 11, 2010

**Q: How do I order flu vaccine for my practice?**

**A:** Ordering flu vaccine is a multiple step process. First, your practice must complete the State Supplied Vaccine (SSV) enrollment process for 2011. During this process you will be asked to pre-book your flu vaccine on the Patient Profile page. In mid-August, practices will be required to complete the Seasonal Influenza Order Breakdown page online. At this time, you will indicate how many doses of vaccine you intend to administer to the members of different vaccination groups. An initial shipment will occur when vaccine in the appropriate presentation is available. To enroll in the State Supplied Vaccine program, see <https://kidsnet.health.ri.gov/lifelongreg-prod/ssv/portal.jsf>.

**Q: When will flu vaccine be delivered?**

**A:** Initial flu vaccine shipments to providers will begin as soon as the Centers for Disease Control and Prevention (CDC) release seasonal flu vaccine to Rhode Island. This will likely be in early September, however, flu vaccine in some presentations may be available sooner than flu vaccine in other presentations.

**Q: Should I be prioritizing my patients for seasonal flu vaccine this year?**

**A:** CDC and the Rhode Island Department of Health (HEALTH) recommend vaccination against flu for all Rhode Islanders who are older than 6 months of age and who are not prevented from receiving vaccine for a medical reason. Vaccination is especially encouraged for individuals who are more likely to experience flu-related complications or who live with or care for people at high risk for developing flu-related complications. These include pregnant women, children younger than 5 years of age, people 50 years of age and older, people with chronic medical conditions, individuals who live in nursing homes and other long-term care facilities, and people who live with or care for those at high risk for complications from flu (i.e. health care workers, household contacts and caregivers of children less than 6 months of age). \_

**Q: Who will need two doses of seasonal flu vaccine this year?**

**A:** Children who are younger than 9 years of age need two doses of flu vaccine this year if they did not receive H1N1 flu vaccine last year, if they are receiving seasonal flu vaccine for the first time, or if they received seasonal flu vaccine last year, for the first time but received only one dose. All adults and children who are older than 9 years of age will only need one dose of seasonal flu vaccine. A CDC Two Doses vs. One Dose decision tree is accompanying this Frequently Asked Questions document

**Q: Will I receive all the vaccine that I ordered at once?**

**A:** No. In most cases, practices will receive multiple shipments of vaccine. This is based on vaccine availability, the maximum doses for delivery that practices indicate on the Influenza Order Breakdown, and reports made by practices of doses administered.

**Q: Can I begin vaccinating children as soon as I receive vaccine or do I need to wait for an official start date?**

**A:** You may begin vaccinating children as soon as you receive vaccine.

**Q: Will school-based flu vaccination clinics be held in my community?**

**A:** School-based flu vaccination clinics will be held in the majority of communities in Rhode Island. A list of school-based clinic times, dates, and locations will be posted on HEALTH's website in September.

**Q: Will school-based flu vaccination clinics be held for those children needing second doses of flu vaccine?**

**A:** No. Rhode Island schools and HEALTH are referring children who need second doses of flu vaccine to their primary care provider this year.

**Q: What presentations of vaccine will be administered at school-based flu vaccination clinics this year?**

**A:** Both injectable and live virus intranasal vaccine will be administered at school-based flu vaccination clinics this year.

**Q: There are several types of influenza vaccine. Does it matter which patients get which vaccines?**

**A:** Yes. Each vaccine is licensed for specific ages and as with any vaccine, all patients should be screened for contraindications. Additionally, Rhode Island has purchased specific vaccine brands for specific age groups. Please use the vaccines only as indicated in the chart below.

6-35 Months Injectable	3-18 Years Injectable	19+ Years Injectable	2-49 Years Intranasal
*Fluzone .25ml	*Fluzone .5ml *Afluria .5ml	Fluviron .5ml Flulaval .5ml *Fluarix .5ml	Flumist

Practices participating in the influenza vaccine program for uninsured adults may also receive Fluarix .5ml for the uninsured population who are 19 years of age and older.

**Q: Can any practice use Flumist for patients under the age of 19?**

**A:** Only practices that indicated when enrolling in the SSV program that they would vaccinate patients who are younger than 19 years of age can administer Flumist to this population. Review your practice profile at the SSV enrollment site if you are unsure of what you indicated at the time of enrollment.

**Q: Can I vaccinate my office staff with the influenza vaccine that I ordered?**

**A:** Yes, provided that the vaccine was ordered for use in those over the age of 19 (Fluviron, Flulaval, Fluarix and Flumist).

**Q: How do I receive additional shipments of influenza vaccine?**

**A:** When completing Section 3 of the weekly on-line Influenza Dose Reporting web page, the practice may request additional shipments of influenza vaccine. Fulfillment of these shipments will be based on pre-book amounts, practice's vaccine on-hand, and percentage of vaccine received that has been used-to-date.

**Q: Will providers be penalized or have to reimburse HEALTH for ordering too much vaccine?**

**A:** There will be no penalty for over-ordering influenza vaccine this year and providers will not have to reimburse HEALTH for over-ordered vaccine. HEALTH strongly encourages practices to order appropriately in order to limit the amount of vaccine that may be wasted at the end of the season.

**Q: Will there be a charge for spoiled vaccine?**

**A:** Vaccine that a practice wastes can count towards its annual 5% wasted vaccine allowance. However, a practice that crosses this 5% threshold will be charged. For HEALTH's Financial Restitution Policy regarding vaccine, see: <http://www.health.ri.gov/policies/StateSuppliedVaccineForChildrenProgramFinancialRestitution.pdf>

**Q: Can OB-GYN or pediatric practices order preservative-free vaccine?**

**A:** All OB-GYN and pediatric practices will receive only preservative-free vaccine when it becomes available. Since HEALTH and the CDC do not support claims of vaccine preservative-related illness, preservative-free vaccine cannot be ordered directly. Pediatric and OB-GYN practices receive preservative-free vaccine simply to eliminate a potential barrier to vaccination for individuals who may be at higher risk of influenza complications that may be concerned about the health effects of vaccine preservatives.

**Q: How will practices receive influenza vaccine after the first shipment?**

**A:** Influenza vaccine will be shipped to providers' offices as it is released from the manufacturers and CDC. Once a provider has received 50% of the allocation that they requested for the year, weekly reports of doses administered will determine the size of future shipments. In this way, the delivery process for seasonal flu vaccine will resemble the delivery process used last year for H1N1 flu vaccine.

**Q: How frequently can a practice request an influenza shipment?**

**A:** Practices can request influenza shipments each week when they report the doses of vaccine that they administered and remaining doses on-hand.

**Q: When will my practice have enough vaccine to hold a clinic?**

**A:** HEALTH recommends that providers do not schedule clinics before mid-October. Vaccine delivery dates are unpredictable and providers may not have enough vaccine to hold clinics before this point.

**Q: Will providers be required to report the doses of flu vaccine that they administer (as they were required to report the doses of H1N1 flu vaccine that they administered)?**

**A:** Yes. Providers must report aggregate doses of seasonal flu vaccine administered each Monday by 11:59 p.m. for the previous vaccination period (Monday through Sunday). They will also be required at that time to select one of three options for their practice regarding influenza vaccination: (1) Final Report: no further influenza doses will be administered; (2) Continuing to vaccinate, no additional doses needed at this time; or (3) Continuing to vaccinate, please ship additional doses. If the third option is chosen the practice will also be required to indicate how many additional doses are needed. Providers administering doses of influenza vaccine to individuals who are younger than 19 years of age must also report child-specific administration information to KIDSNET.

## State Supplied Vaccine (SSV) Product Availability Guidance

Vaccines may be ordered only for age groups identified during enrollment (Practice Profile: Section A). There are 2 separate vaccine order forms based on the age of the vaccine recipient:

- Vaccines ordered from the Childhood Vaccine Order form may only be used for those <19 years of age
  - Vaccines ordered from the Adult Vaccine Order form may only be used for those ≥ 19 years of age

**Order Frequency:** Orders for all vaccines other than Influenza may be made a maximum of once every 30 days. Submit both Childhood and Adult vaccine orders at the same time, this will eliminate the need of submitting multiple copies of Temperature Logs.

**Influenza Reporting and Orders:** Influenza doses administered and vaccine orders for all ages are made on-line through the SSV Influenza Reporting Website. Weekly reporting is required by 11:59 pm each Monday (for the previous week of Monday – Sunday) in order to receive additional orders of influenza vaccine. Practices are allowed to request influenza vaccine orders a maximum of once per week during the influenza season. Orders will be filled based on on-hand inventory and doses administered-to-date information reported by the practice.

**Returns/Transfers:** Prior approval from HEALTH is required for all vaccine return and/or transfer requests. Please call 222-4639, fax 222-3805, or email: [vaccine@health.ri.gov](mailto:vaccine@health.ri.gov) for authorization.

### SSV Vaccines available for Individuals <19 years of age : Use Childhood Vaccine Order form

#### Available Vaccines (Brand-name):

DTaP (Infanrix)	DTaPHBIPV (Pediarix)	DTaP/IPV (Kinrix)	Hep A (Havrix)
Hep B (Engerix)	HIB (PedvaxHib)	HPV (Gardasil)	MCV4 (Menactra)
MMR (MMR II)	PCV 13 (Pneumovax 13)	PPV-23 (Pneumovax)	Rotavirus (Roatrix)
TDaP (Boostrix)	Varicella (Varivax)	Influenza (Fluzone, Afluria, FluMist)	

#### Special Order Vaccines:

- DT (Diphtheria & Tetanus Toxoid) - For high risk children with contraindications to Pertussis vaccine in DTaP
- TD-PF (Tetanus & Diphtheria Toxoid) - For high risk adolescents with contraindications to Pertussis vaccine in TDaP
- IPV (IPOL) - For high risk children with contraindications to Pertussis vaccine in DTaPHBIPV or DTaP/IPV

### SSV Vaccines available for Individuals 19 years of age and older: Use Adult Vaccine Order form

#### Vaccines (Brand-name):

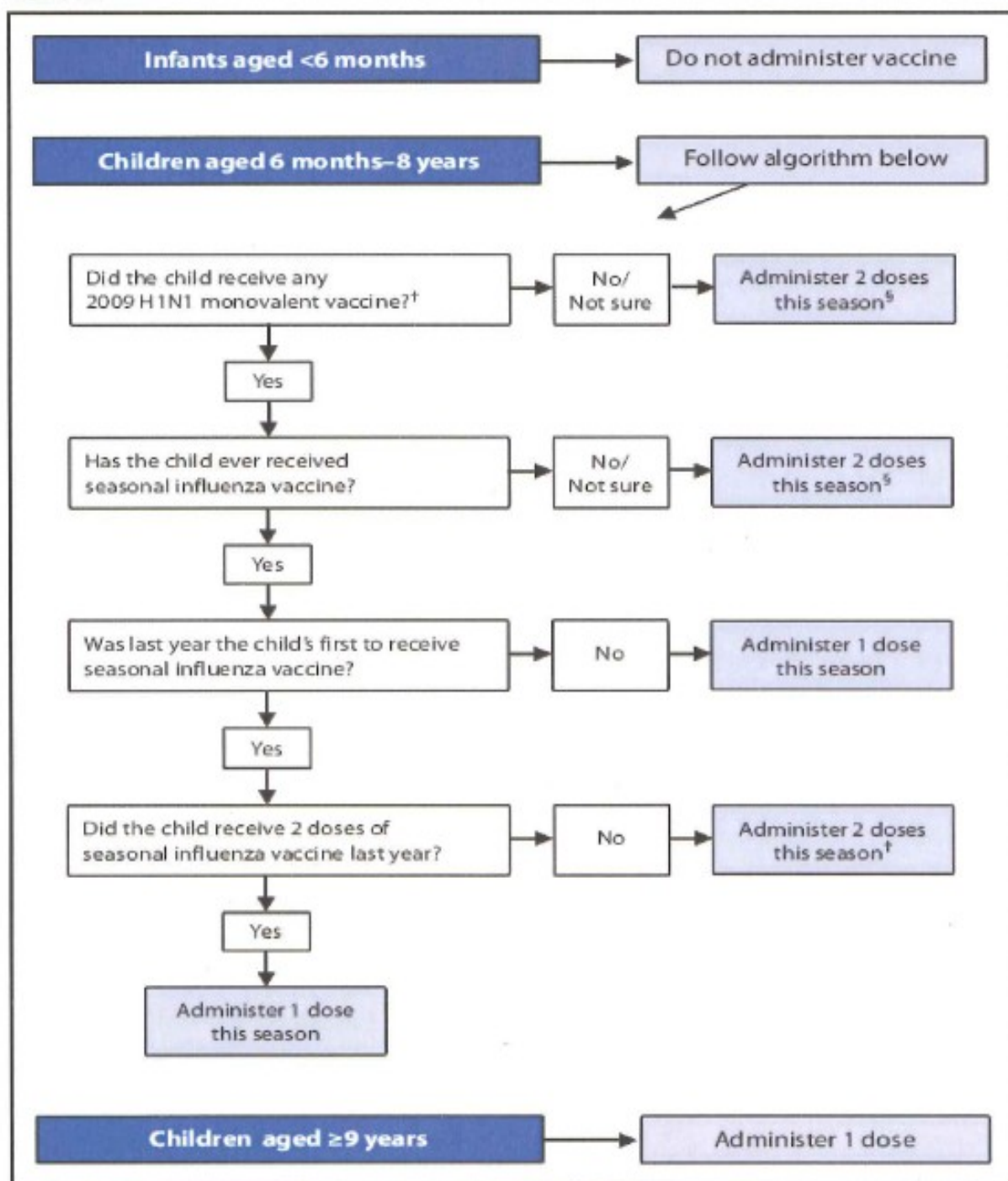
TDaP (Adacel)	PPV-23 (Pneumovax)	Influenza (Fluvirin, Fluorix, FluLaval)
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#### Special Order Vaccines:

- Provider must be enrolled in the Adult Hepatitis Initiative to receive:
  - Hep B-A (Twinrix), Hep A (Havrix), Hep B (Engerix)
- Available as a one-time seed vaccine for clinics seeing uninsured patients only
  - HPV (Gardasil)
- For uninsured patients needing vaccines for employment in healthcare
  - MMR (MMR II), Varicella (Varivax), TDaP (Adacel), Hep B (Engerix)
- Available by special request for surgical patients
  - HIB (PedvaxHib), MCV4 (Menactra)



**FIGURE 3. Number of 2010–2011 seasonal influenza vaccine doses recommended for children**



\* Figure developed by CDC with the American Academy of Pediatrics, Committee on Infectious Diseases.

† Children who had a laboratory-confirmed 2009 pandemic H1N1 virus infection (e.g., reverse transcription–polymerase chain reaction or virus culture specific for 2009 pandemic influenza A(H1N1) virus) are likely to be immune to this virus. At provider discretion, these children can have a “Yes” entered at this box, and proceed down the path to the next box to determine whether two doses are indicated based on seasonal vaccine history. However, if no test result is available and no influenza A(H1N1) 2009 monovalent vaccine was administered, enter “no” here.

⁵ Interval between 2 doses is ≥4 weeks.